

MONTHLY OPERATING REPORT**Huon Le, Chapter 13 Trustee-Augusta**Name: SPRAGUE TRUCKINGCase Number: 19-10835-SBDOperating Report Start Date: 09-01-19Operating Report End Date: 09-30-2019**GROSS BUSINESS INCOME**

| Date | Brief Description of Work or Service Performed | Payment |
|--|--|-------------------|
| | LOADS Hauled | \$ |
| | | \$ |
| 9-12-19 | | \$ 2700.00 |
| 9-23-19 | | \$ 1600.00 |
| 9-26-19 | | \$ 2500.00 |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | Total from continuation sheet, if any: | \$ |
| A. TOTAL GROSS BUSINESS INCOME: | | \$ 6800.00 |

BUSINESS EXPENSES

| Date | Category | Amount |
|---|--|-------------------|
| | Payroll/Labor: | \$ |
| | Rent/Mortgage: | \$ |
| | Utilities (Including gas): Diesel | \$ 3053.83 |
| | Insurance: Ooida | \$ 1055.00 |
| | Factoring Fee: | \$ 272.00 |
| | Other (specify): PREPASS, DAT, ELD | \$ 110.95 |
| | Other (specify): FOOD + ROAD Expense | \$ 300.00 |
| | Other (specify): Power Steering Repair | \$ 600.00 |
| | Other (specify): | \$ |
| | Other (specify): | \$ |
| | Other (specify): | \$ |
| | Total from continuation sheet, if any: | \$ |
| B. TOTAL BUSINESS EXPENSES: | | \$ 5391.78 |
| C. NET BUSINESS INCOME/PROFIT (Subtract Line B from Line A): | | \$ 1408.22 |

NOTE: Only income and expenses from self-employment, operation of a business, and similar should be listed. Do not include income from other sources or personal expenses.

I declare under penalty of perjury that the statements and figures provided in the above Operating Report are true and complete to the best of my knowledge.


Signature: Michael C. Sprague Print Name: Michael C. Sprague Date: 09-30-2019

CERTIFICATE OF SERVICE

This is to certify that I, Charles W. Wills, have this day served a true and correct copy of the within and foregoing "MONTHLY OPERATING REPORT" upon the following:

Huon Le
Chapter 13 Trustee
[VIA ECF]

This the 4th day of February, 2020.



Charles W. Wills
Attorney for Debtors

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